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| | |
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| Application Number | 10/034995 |
| Filing Date | 01/03/2002 |
| First Named Inventor | Scott Musman |
| Art Unit | 2143 |
| Examiner Name | WILEY, DAVID |
| Attorney Docket Number | 82088-0001 |

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

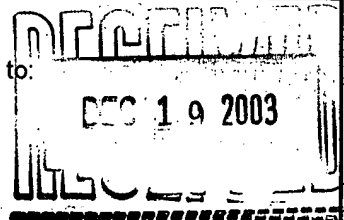
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| | | | | | |
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| <input checked="" type="checkbox"/> Firm or Individual Name | Scott Musman | | | | |
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|---------------------|----------|--------------|
| Name | Scott Musman | | |
| Signature | <i>Scott Musman</i> | | |
| Date | 12/02/2003 | 12/02/03 | Telephone |
| | | | 703-338-9484 |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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